| Fill in this information to identify your case: | | |
|---|-------------------------------|------------------------------------|
| United States Bankruptcy Court for the: | | |
| WESTERN DISTRICT OF WASHINGTON | - | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | Chapter 13 | Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/22

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: Identify | Yourself | | | |
|-----|--|---|--|--|---|
| | | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full nar | ne | | | |
| | Write the nan your governm picture identit | nent-issued fication (for | Shelly First name | | First name |
| | example, you | | Marie | | |
| | license or pa | ssport). | Middle name | | Middle name |
| | Bring your pic | | Erickson | | |
| | identification meeting with | | Last name and Suffix (Sr., Jr., II, III) | | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other nar | nes you have ast 8 years | | | |
| | Include your maiden name assumed, tra doing busine | es and any de names and | Shelly Marie Erickson-Davis | | |
| | Do NOT list t any separate such as a cor partnership, on not filling this | legal entity poration, or LLC that is | | | |
| 3. | Only the last your Social and number or for Individual Taldentification (ITIN) | Security ederal expayer | xxx-xx-6116 | | |

| De | btor 1 Shelly Marie Eric | ekson | Case number (if known) | | |
|----|--|---|--|--|--|
| | | | | | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
| 4. | Your Employer Identification Number (EIN), if any. | | | | |
| | (EIN), II ally. | EIN | EIN | | |
| 5. | Where you live | | If Debtor 2 lives at a different address: | | |
| | | 2930 NW Hill St | | | |
| | | Camas, WA 98607 Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Clark | | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

| Deb | Debtor 1 Shelly Marie Erickson | | | | Case number (if known) | | |
|-----|---|--------------------------|---------------------------------------|---|---|--|---------------|
| | | | | | | | |
| Par | t 2: Tell the Court About | Your Bankruptc | y Case | | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | | | on of each, see <i>Notic</i> o of page 1 and check | | U.S.C. § 342(b) for Individuals Filing for Bankox. | kruptcy |
| | choosing to me under | ☐ Chapter 7 | | | | | |
| | | ☐ Chapter 11 | | | | | |
| | | ☐ Chapter 12 | | | | | |
| | | Chapter 13 | | | | | |
| 8. | How you will pay the fee | about ho order. If | w you may pay | Гуріcally, if you are pa | ying the fee your | with the clerk's office in your local court for mo self, you may pay with cash, cashier's check, your attorney may pay with a credit card or c | or money |
| | | | | nstallments. If you chents (Official Form 10 | | sign and attach the Application for Individuals | s to Pay |
| | | | • | ` | , | nly if you are filing for Chapter 7. By law, a jud | dae mav. |
| | | but is not applies to | t required to, waive your family size | ve your fee, and may of and you are unable t | do so only if your o pay the fee in ir | income is less than 150% of the official pover stallments). If you choose this option, you mu Form 103B) and file it with your petition. | rty line that |
| 9. | Have you filed for | ■ No. | | | | | |
| | bankruptcy within the last 8 years? | ☐ Yes. | | | | | |
| | | Dist | rict | Wi | nen | Case number | |
| | | Dist | rict | Wh | nen | | |
| | | Dist | rict | Wi | nen | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | |
| | | Deb | otor | | | Relationship to you | |
| | | Dist | rict | Wi | nen | Case number, if known | |
| | | Deb | otor | | | Relationship to you | |
| | | Dist | rict | Wi | nen | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. Go | to line 12. | | | | |
| | residence : | ☐ Yes. Ha | s your landlord o | btained an eviction ju | dgment against y | ou? | |
| | | | No. Go to lii | ne 12. | | | |
| | | | | Initial Statement Abortory petition. | ut an Eviction Jud | dgment Against You (Form 101A) and file it as | s part of |
| | | | | | | | |

| Deb | otor 1 Shelly Marie Erick | cson | | | Case number (if known) |
|-----|--|----------------------|---|---|--|
| | | | | | |
| Par | t 3: Report About Any Bu | ısinesses | You Ow | າ as a Sole Propriet | or |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Nam | e and location of busi | iness |
| | A sole proprietorship is a | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | e of business, if any | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numi | per, Street, City, State | e & ZIP Code |
| | it to this petition. | | Chec | k the appropriate box | x to describe your business: |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker | r (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| | Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D). | proceed you are o | under Suchoosing vistateme (B). I am Code I am I do r | to proceed under Subtent, and federal incommot filing under Chapter 1 to the chapter 1 to the chapter 1 to the choose to proceed filing under Chapter 1 to the choose to proceed filing under Chapter 1 to the choose to proceed filing under Chapter 1 to the choose to proceed filing under Chapter 1 | I1, but I am NOT a small business debtor according to the definition in the Bankruptcy I1, I am a small business debtor according to the definition in the Bankruptcy Code, and d under Subchapter V of Chapter 11. I1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I |
| Par | t 4: Report if You Own or | · Have Any | | · | Subchapter V of Chapter 11. r Property That Needs Immediate Attention |
| 14. | Do you own or have any | ■ No. | | | |
| | property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ☐ Yes. | What is | the hazard? | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | diate attention is , why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where i | s the property? | |
| | - • | | | | Number, Street, City, State & Zip Code |
| | | | | | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | otor 1 Shelly Marie Erick | son | | Case number (if I | nown) |
|---|--|---|---|---|---|
| Par | t 6: Answer These Questi | ons for Re | eporting Purposes | | |
| 16. | What kind of debts do you have? | 16a. | Are your debts primarily consult individual primarily for a personal, | mer debts? Consumer debts are defined family, or household purpose." | in 11 U.S.C. § 101(8) as "incurred by an |
| | | | ☐ No. Go to line 16b. | | |
| | | | Yes. Go to line 17. | | |
| | | 16b. | | ess debts? Business debts are debts that ent or through the operation of the busines | |
| | | | ☐ No. Go to line 16c. | | |
| | | | ☐ Yes. Go to line 17. | | |
| | | 16c. | State the type of debts you owe th | nat are not consumer debts or business de | ebts |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapter 7. G | o to line 18. | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. | | ou estimate that after any exempt property le to distribute to unsecured creditors? | is excluded and administrative expenses |
| | administrative expenses are paid that funds will | | □ No | | |
| | be available for distribution to unsecured creditors? | | Yes | | |
| 18. | How many Creditors do you estimate that you owe? | ■ 1-49 □ 50-99 □ 100-19 □ 200-99 | | ☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000 | ☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000 |
| 19. | How much do you estimate your assets to be worth? | □ \$100,0 | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| 20. | How much do you estimate your liabilities to be? | □ \$100,0 | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| Par | 7: Sign Below | | | | |
| For | you | I have ex | amined this petition, and I declare | under penalty of perjury that the information | on provided is true and correct. |
| | | | | n aware that I may proceed, if eligible, und available under each chapter, and I choos | |
| If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out the document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | attorney to help me fill out this | |
| I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | bankrupto and 3571 | cy case can result in fines up to \$25 | cealing property, or obtaining money or pro 50,000, or imprisonment for up to 20 years | |
| | | Shelly N | Marie Erickson e of Debtor 1 | Signature of Debtor 2 | |
| | | Executed | on August 18, 2023 MM / DD / YYYY | Executed on MM / DI | D/YYYY |

| Debtor 1 Shelly Marie Ericl | kson | Cas | se number (if known) |
|---|--|----------------------------|--|
| | | | |
| For your attorney, if you are represented by one | under Chapter 7, 11, 12, or 13 of title 11, United S | States Code, and have e | einformed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) |
| If you are not represented by an attorney, you do not need to file this page. | and, in a case in which § 707(b)(4)(D) applies, conschedules filed with the petition is incorrect. | ertify that I have no knov | wledge after an inquiry that the information in the |
| | /s/ Timothy M. Coleman | Date | August 18, 2023 |
| | Signature of Attorney for Debtor | | MM / DD / YYYY |
| | Timothy M. Coleman #22866 | | |
| | Printed name | | |
| | OlsenDaines | | |
| | Firm name | | |
| | PO Box 12829 | | |
| | Salem, OR 97309 | | |
| | Number, Street, City, State & ZIP Code | | |
| | Contact phone (503) 362-9393 | Email address | |
| | #22866 WA | | |

Bar number & State

Official Form 101 Case 23-41388-MJH Doc 1 Filed 08/22/23 Ent. 08/22/23 10:53:57 Pg. 7 of 49

| Fill | in this information to identify your case | · | | | |
|-------------|--|---|--|--------------------|-------------------------------|
| | tor 1 Shelly Marie Erickso | | | | |
| | First Name | Middle Name | Last Name | | |
| | tor 2 use if, filing) First Name | Middle Name | Last Name | | |
| Unit | ed States Bankruptcy Court for the: W | ESTERN DISTRICT | OF WASHINGTON | | |
| | _ | | | | |
| (if kn | e number | | | _ | c if this is an ded filing |
| | | | | | |
| Of | icial Form 106Sum | | | | |
| Su | mmary of Your Assets and | d Liabilities a | nd Certain Statistical Information | 1 | 12/15 |
| info you | mation. Fill out all of your schedules fi original forms, you must fill out a new | rst; then complete t | e are filing together, both are equally responsible he information on this form. If you are filing amer k the box at the top of this page. | | |
| Par | 1: Summarize Your Assets | | | | |
| | | | | Your a Value of | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form | | | | |
| | 1a. Copy line 55, Total real estate, from | Schedule A/B | | \$ | 715,000.00 |
| | 1b. Copy line 62, Total personal property | , from Schedule A/B. | | \$ | 28,768.00 |
| | 1c. Copy line 63, Total of all property on | Schedule A/B | | \$ | 743,768.00 |
| Par | 2: Summarize Your Liabilities | | | | |
| | | | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A | | (Official Form 106D) the bottom of the last page of Part 1 of <i>Schedule D.</i> | . \$ | 370,233.00 |
| 3. | Schedule E/F: Creditors Who Have Unso 3a. Copy the total claims from Part 1 (pr | ecured Claims (Officia riority unsecured clain | al Form 106E/F) ns) from line 6e of <i>Schedule E/F</i> | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (no | onpriority unsecured of | claims) from line 6j of Schedule E/F | \$ | 170,467.00 |
| | | | Your total liabilitie | es \$ | 540,700.00 |
| Par | 3: Summarize Your Income and Exp | oenses | | | |
| 4. | Schedule I: Your Income (Official Form 1 | 061) | ə l | \$ | 6,682.00 |
| 5. | Schedule J: Your Expenses (Official For Copy your monthly expenses from line 2 | , | | \$ | 5,433.00 |
| Par | 4: Answer These Questions for Adr | ninistrative and Stat | istical Records | | |
| 6. | Are you filing for bankruptcy under C | • • • • | check this box and submit this form to the court with y | our other scl | nedules. |
| | ■ Yes | • | | | |
| 7. | What kind of debt do you have? | | | | |
| | | | debts are those "incurred by an individual primarily for great for statistical purposes. 28 U.S.C. § 159. | or a personal | , family, or |

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Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

12,829.25

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total cl | aim |
|---|----------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 28,846.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 28,846.00 |

| First Name | ebtor 1 | Shelly Marie Ericks | son | | | |
|---|---|---|---------------------------|--|---|---|
| ited States Bankruptcy Court for the: WESTERN DISTRICT OF WASHINGTON Check if this is amended filing Ifficial Form 106A/B Check if this is amended filing To the dule A/B: Property 12/15 The dule A/B: Property The sase of the casegory was accurate as possible. If two married people are filing together, both are equally responsible for supplying correct ormation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). The describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in the property? No. Go to Part 2. Yes. Where is the property? What is the property? Check all that apply Single-flamily home Universiment property Manufactured or mobile home Land Carrent value of the entire property? Timeshare Other Who has an interest in the property? Check one Who bas an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one Who has an interest in the property? Check one all feet state), it known. Clark County Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | | | | e Last Name | | |
| Check if this is amended filing in the characteristic filing in the case of th | ebtor 2 ouse, if filing) | First Name | Middle Name | e Last Name | | |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | ited States Ba | nkruptcy Court for the: \ | WESTERN DIST | TRICT OF WASHINGTON | | |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | see number | _ | | | | |
| chedule A/B: Property ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where ye k it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct matter. If two pour name and case number (if known), were every question. 11 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | | | | | | amended filing |
| chedule A/B: Property ach category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where ye k it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct matter. If two pour name and case number (if known), were every question. 11 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | | | | | | |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | fficial Fo | rm 106A/B | | | | |
| k it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct matter. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), were every question. The property of the proper | chedul | e A/B: Prope | erty | | | 12/15 |
| mation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). were every question. 118 Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in 20 you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | | | | | | |
| Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest in to you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. What is the property? Check all that apply Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | | | | | | |
| Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | | | separate sneet to | o tins form. On the top of any additional page | s, write your name and or | ase number (ii known). |
| Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. | | | | | | |
| Very What is the property? Check all that apply Single-family home | Describe | Each Residence, Building, | Land, or Other Ro | eal Estate You Own or Have an Interest In | | |
| Yes. Where is the property? | o vou own or l | nave any legal or equitable i | interest in any re | sidence, building, land, or similar property? | | |
| What is the property? Check all that apply 2930 NW Hill St | _ | are any regar or equivalent | | | | |
| ## What is the property? Check all that apply Single-family home | No. Go to Par | t 2. | | | | |
| ## What is the property? Check all that apply Single-family home | - | | | | | |
| Street address, if available, or other description | Yes. Where is | s the property? | | | | |
| 2930 NW Hill St Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative | Yes. Where is | s the property? | | | | |
| 2930 NW Hill St Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative | Yes. Where is | s the property? | | | | |
| Street address, if available, or other description Duplex or multi-unit building Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Land Current value of the entire property? State ZIP Code Investment property S715,000.00 \$715,000.00 \$715,000.00 S715,000.00 S715,000.0 | Yes. Where is | s the property? | | | | |
| Camas WA 98607-0000 City State ZIP Code Investment property Timeshare Other Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Camas WA 98607-0000 Manufactured or mobile home Land Current value of the entire property? \$715,000.00 \$715,000 \$715,000.00 \$715,000 Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties a life estate), if known. Check if this is community property Check if this is community property Check if this is community property identification number: | Yes. Where is | s the property? | wi | hat is the property? Check all that apply | | |
| Camas WA 98607-0000 City State ZIP Code Land Investment property Timeshare Other Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: County Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW | Hill St | wi | _ ` ` ` ` | | |
| Camas WA 98607-0000 City State ZIP Code Investment property S715,000.00 \$715, | 2930 NW | Hill St | | Single-family home | the amount of any secu | red claims on Schedule D |
| Camas WA 98607-0000 City State ZIP Code Investment property \$715,000.00 \$715,000. Investment property \$715,000.00 \$715,000.0 | 2930 NW | Hill St | | ☐ Single-family home ☐ Duplex or multi-unit building | the amount of any secu | red claims on Schedule Da |
| City State ZIP Code Investment property Timeshare Other Who has an interest in the property? Check one Debtor 1 only County Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Clark Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW | Hill St | | ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative | the amount of any secu | red claims on Schedule D: |
| Clark County Describe the nature of your ownership interes (such as fee simple, tenancy by the entireties a life estate), if known. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW | Hill St if available, or other description | | ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative | the amount of any secu Creditors Who Have Cl | red claims on Schedule Da |
| Clark County Debtor 1 only Debtor 2 only Debtor 1 and Debtor 3 and another Other information you wish to add about this item, such as local property identification number: Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties a life estate), if known. Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties a life estate), if known. Check if this is community property (see instructions) Other information you wish to add about this item, such as local property identification number: | 2930 NW Street address, | Hill St if available, or other description | 7 0000 | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home | the amount of any secu Creditors Who Have Cl | red claims on Schedule D. aims Secured by Property. Current value of the |
| Clark County Clark Debtor 1 only Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for (such as fee simple, tenancy by the entireties a life estate), if known. (such as fee simple, tenancy by the entireties a life estate), if known. (such as fee simple, tenancy by the entireties a life estate), if known. (such as fee simple, tenancy by the entireties a life estate), if known. Check if this is community property (see instructions) Other information you wish to add about this item, such as local property identification number: | 2930 NW I | Hill St if available, or other description WA 9860 | 07-0000 | ☐ Single-family home ☐ Duplex or multi-unit building ☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land | the amount of any secu Creditors Who Have Cl Current value of the entire property? | red claims on Schedule D: aims Secured by Property. Current value of the portion you own? |
| Clark County Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW I | Hill St if available, or other description WA 9860 | 07-0000 | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property | the amount of any secu Creditors Who Have Cl Current value of the entire property? \$715,000.00 | current value of the portion you own? |
| County Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW I | Hill St if available, or other description WA 9860 | 07-0000 P Code | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$715,000.00 Describe the nature of | current value of the portion you own? \$715,000.05 |
| County Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW I | Hill St if available, or other description WA 9860 | 07-0000 P Code | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other | Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to | Current value of the portion you own? \$715,000. f your ownership interestenancy by the entireties, |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW I | Hill St if available, or other description WA 9860 | 07-0000 P Code | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other ho has an interest in the property? Check one | Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to | Current value of the portion you own? \$715,000. f your ownership interesenancy by the entireties, |
| At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW Street address, Camas City | Hill St if available, or other description WA 9860 | 9 7-0000 P Code | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other ho has an interest in the property? Check one Debtor 1 only | Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to | Current value of the portion you own? \$715,000. f your ownership interestenancy by the entireties, |
| Other information you wish to add about this item, such as local property identification number: Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW Street address, Camas City Clark | Hill St if available, or other description WA 9860 | 07-0000 P Code WI | Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other ho has an interest in the property? Check one Debtor 1 only Debtor 2 only | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to a life estate), if known | current value of the portion you own? f your ownership interesenancy by the entireties, |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW Street address, Camas City Clark | Hill St if available, or other description WA 9860 | 07-0000 P Code WI | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ ho has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to a life estate), if known | current value of the portion you own? f your ownership interesenancy by the entireties, |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for | 2930 NW Street address, Camas City Clark | Hill St if available, or other description WA 9860 | 07-0000 P Code WI | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to a life estate), if known Check if this is co (see instructions) | Current value of the portion you own? \$715,000. f your ownership interestenancy by the entireties, |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$715,000.00 | 2930 NW Street address, Camas City Clark | Hill St if available, or other description WA 9860 | 07-0000 P Code WI | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Information you wish to add about this items. | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to a life estate), if known Check if this is co (see instructions) | Current value of the portion you own? \$715,000. f your ownership interes enancy by the entireties, |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$715,000.00 | 2930 NW Street address, Camas City Clark | Hill St if available, or other description WA 9860 | 07-0000 P Code WI | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Information you wish to add about this items. | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to a life estate), if known Check if this is co (see instructions) | Current value of the portion you own? \$715,000. f your ownership interes enancy by the entireties, |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$715.000.00 | 2930 NW Street address, Camas City Clark | Hill St if available, or other description WA 9860 | 07-0000 P Code WI | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Information you wish to add about this items. | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to a life estate), if known Check if this is co (see instructions) | current value of the portion you own? f your ownership interesenancy by the entireties, |
| Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$715,000.00 | 2930 NW Street address, Camas City Clark | Hill St if available, or other description WA 9860 | 07-0000 P Code WI | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Investment property □ Timeshare □ Other □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Information you wish to add about this items. | the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to a life estate), if known Check if this is co (see instructions) | current value of the portion you own? f your ownership interesenancy by the entireties, |
| | 2930 NW Street address, Camas City Clark County | Hill St if available, or other description WA 9860 State ZII | 07-0000 P Code WI | □ Single-family home □ Duplex or multi-unit building □ Condominium or cooperative □ Manufactured or mobile home □ Land □ Investment property □ Timeshare □ Other □ ho has an interest in the property? Check one □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another her information you wish to add about this its operty identification number: | the amount of any secu Creditors Who Have Cli Current value of the entire property? \$715,000.00 Describe the nature of (such as fee simple, to a life estate), if known Check if this is co (see instructions) em, such as local | Current value of the portion you own? \$715,000. f your ownership interes enancy by the entireties, |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

| Deb | tor 1 Shelly Mari | e Erickson | Case number (if known) | |
|-------------|---|---|-------------------------------|---|
| 3. C | ars, vans, trucks, tra | ctors, sport utility vehicles, motorcycles | | |
| | No | | | |
| | Yes | | | |
| | | | | |
| 3.1 | | Who has an interest in the property? Check one | | red claims or exemptions. Put secured claims on <i>Schedule D:</i> |
| | Model: HRV | Debtor 1 only | Creditors Who Hav | re Claims Secured by Property. |
| | Year: 2018 | Debtor 2 only | Current value of t | |
| | Approximate mileage: Other information: | ☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another | entire property? | portion you own? |
| | Carlot information. | At least one of the deptots and another | | |
| | | Check if this is community property (see instructions) | \$17,500 | .00 \$17,500.00 |
| 5 A p | 3: Describe Your Personal Coursehold goods and Examples: Major applia | of the portion you own for all of your entries from Part 2, including the for Part 2. Write that number here | | \$17,500.00 Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Yes. Describe | Household Goods and Furniture | | \$5,000.00 |
| E | | and radios; audio, video, stereo, and digital equipment; computers, public phones, cameras, media players, games Electronics | printers, scanners; music co | ollections; electronic devices |
| E | | d figurines; paintings, prints, or other artwork; books, pictures, or oth tions, memorabilia, collectibles | ner art objects; stamp, coin, | or baseball card collections; |
| | quipment for sports Examples: Sports, photomusical inst No Yes. Describe | ographic, exercise, and other hobby equipment; bicycles, pool table | s, golf clubs, skis; canoes a | and kayaks; carpentry tools; |
| | | Hobby equipment | | \$950.00 |
| | | | | |

| Debtor 1 | Shelly Marie Erickson | Case number (if kno | wn) |
|---------------------------|---|---|---|
| 10. Fireari | | d valente di avvisione aut | |
| Exam _i ■ No | ples: Pistols, rifles, shotguns, ammunition, an | a related equipment | |
| | Describe | | |
| 11. Clothe | | | |
| Exam _l □ No | ples: Everyday clothes, furs, leather coats, de | signer wear, shoes, accessories | |
| | Describe | | |
| — 100. | | | |
| | Clothing | | \$450.00 |
| □ No | | agement rings, wedding rings, heirloom jewelry, watches, gen | ns, gold, silver |
| | Jewelry | | \$300.00 |
| Exam _i □ No | arm animals ples: Dogs, cats, birds, horses Describe | | |
| | 4 Cats | | \$0.00 |
| | the dollar value of all of your entries from art 3. Write that number here | Part 3, including any entries for pages you have attached | \$7,100.00 |
| | escribe Your Financial Assets | | |
| Do you ov | wn or have any legal or equitable interest i | n any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| □ No | ples: Money you have in your wallet, in your h | nome, in a safe deposit box, and on hand when you file your p | etition |
| | | Cash on hand | d \$103.00 |
| | | | |
| | its of money ples: Checking, savings, or other financial acc institutions. If you have multiple account | counts; certificates of deposit; shares in credit unions, brokera is with the same institution, list each. | ge houses, and other similar |
| | | Institution name: | |
| | 17.1. Savings | Bank of America (0417) | \$2,000.00 |
| | 17.2. Checking | Bank of America (9900) | \$300.00 |
| Official For | m 106A/B | Schedule A/B: Property | page 3 |

| De | ו וסוט | Snelly Ma | rie Erickson | Case number (if known) | |
|-----|-----------------------|----------------------------------|--|---|-------------------------------|
| | | | | | |
| | Examp | | ls, or publicly traded stocks ds, investment accounts with | s brokerage firms, money market accounts | |
| _ | ■ No | | Institution or issu | lot namo: | |
| ı | → Yes | | institution of issu | der name. | |
| 19. | | ublicly traded enture | stock and interests in inco | orporated and unincorporated businesses, including an interes | t in an LLC, partnership, and |
| | No | | | | |
| Į | ⊒ Yes. | Give specific | information about them Name of entity: | % of ownership: | |
| | Negoti | iable instrume | nts include personal checks, | egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them. | |
| I | □ Yes. | Give specific | information about them Issuer name: | | |
| I | <i>Exam</i> µ ⊐ No | | in IRA, ERISA, Keogh, 401(k | s), 403(b), thrift savings accounts, or other pension or profit-sharing | plans |
| | Yes. | List each acco | ount separately. | Institution name: | |
| | | | Type of account: | Institution name: | |
| | | | 401(k) | Milliman | \$1,765.00 |
| ı | <i>Exam</i> µ ■ No | ples: Agreeme | nts with landlords, prepaid re | ent, public utilities (electric, gas, water), telecommunications compar | iles, or others |
| I | ☐ Yes. | | | Institution name or individual: | |
| _ | Annuit ■ No | ties (A contrac | et for a periodic payment of mo | oney to you, either for life or for a number of years) | |
| I | ☐ Yes | | Issuer name and description | n. | |
| | 26 U.S. | ts in an educa C. §§ 530(b)(1 | ation IRA, in an account in a 1), 529A(b), and 529(b)(1). | a qualified ABLE program, or under a qualified state tuition pro | gram. |
| _ | ■ No □ Yes | | Institution name and descrip | otion. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| ı | No | | | y (other than anything listed in line 1), and rights or powers exe | rcisable for your benefit |
| [| ☐ Yes. | Give specific | information about them | | |
| | | | | , and other intellectual property ceeds from royalties and licensing agreements | |
| _ | | Give specific | information about them | | |
| | Examp | | s, and other general intang permits, exclusive licenses, co | ibles coperative association holdings, liquor licenses, professional licens | es |
| _ | ■ No □ Yes. | | | | |
| | | Give specific | information about them | | |

| De | ebtor 1 | Shelly Marie Erickson | Case number (if known) | |
|-----|--------------|---|---|------------------------|
| 28. | Tax ref | funds owed to you | | |
| | ■ No | • | | |
| | ☐ Yes. | Give specific information about them, including wh | nether you already filed the returns and the tax years | |
| | | | | |
| 29. | Family | support | | |
| | | | ort, child support, maintenance, divorce settlement, property se | ttlement |
| | ■ No | | | |
| | ☐ Yes. | Give specific information | | |
| | 24 | | | |
| 30. | | amounts someone owes you oles: Unpaid wages, disability insurance payments, | , disability benefits, sick pay, vacation pay, workers' compensa | ation, Social Security |
| | , | benefits; unpaid loans you made to someone | | , |
| | ■ No | | | |
| | ⊔ Yes. | Give specific information | | |
| 31. | | sts in insurance policies | | |
| | ■ No | oles: Health, disability, or life insurance; health savi | ings account (HSA); credit, homeowner's, or renter's insurance | ! |
| | | Name the insurance company of each policy and li | list its value. | |
| | | Company name: | Beneficiary: | Surrender or refund |
| | | | | value: |
| 32. | | terest in property that is due you from someone | | a a series de la conse |
| | • | are the beneficiary of a living trust, expect proceeds one has died. | Is from a life insurance policy, or are currently entitled to receive | e property because |
| | ■ No | | | |
| | ☐ Yes. | Give specific information | | |
| | | | | |
| 33. | | s against third parties, whether or not you have bles: Accidents, employment disputes, insurance cl | | |
| | ■ No | oroc. Accidence, emproyment disputes, incurarios er | ialino, or rigino to odo | |
| | ☐ Yes. | Describe each claim | | |
| 34 | Other | contingent and unliquidated claims of every nat | ture, including counterclaims of the debtor and rights to se | et off claims |
| 04. | ■ No | ooningon ana aniquiadea sianno or overy na | iano, monading dodinorolamio of the debier and nighte to de | or on olumo |
| | ☐ Yes. | Describe each claim | | |
| 35 | Any fir | nancial assets you did not already list | | |
| JJ. | ■ No | idiloidi doseto yed did ilet diletady ilet | | |
| | _ | Give specific information | | |
| | | | | |
| 36 | | | 4, including any entries for pages you have attached | \$4,168.00 |
| | 101 1 6 | art 4. Write that number here | | |
| Pa | rt 5: De | scribe Any Business-Related Property You Own or Ha | ave an Interest In. List any real estate in Part 1. | |
| 27 | Do you | own or have any legal or equitable interest in any busi | inose-related property? | |
| | _ ′ | o to Part 6. | mess-related property: | |
| [| ☐ Yes. C | Go to line 38. | | |
| | | | | |
| Do | u4 G. Do | cariba Anu Farm and Commercial Fishing Related Pro | remember Very Overs on Heave on Intercent In | |
| Pa | | scribe Any Farm- and Commercial Fishing-Related Pro ou own or have an interest in farmland, list it in Part 1. | operty You Own or Have an Interest In. | |
| 16 | Do you | Lown or have any local or equitable interest in | any farm- or commercial fiching-related property? | |
| 40. | _ ` | I own or nave any legal or equitable interest in a Go to Part 7. | any farm- or commercial fishing-related property? | |
| | _ | Go to line 47. | | |
| | — 165 | . 00 to mie 47. | | |
| Pa | rt 7: | Describe All Property You Own or Have an Interest | in That You Did Not List Above | |

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page 5

Schedule A/B: Property

Official Form 106A/B

| Shelly Marie Erickson | | Case number (if known) | |
|---|----------------|------------------------------|--------------|
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No | ? | | |
| ☐ Yes. Give specific information | | | |
| 54. Add the dollar value of all of your entries from Part 7. Write the | at number here | | \$0.00 |
| Part 8: List the Totals of Each Part of this Form | | | |
| 55. Part 1: Total real estate, line 2 | | | \$715,000.00 |
| 56. Part 2: Total vehicles, line 5 | \$17,500.00 | | |
| 57. Part 3: Total personal and household items, line 15 | \$7,100.00 | | |
| 58. Part 4: Total financial assets, line 36 | \$4,168.00 | | |
| 59. Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. Total personal property. Add lines 56 through 61 | \$28,768.00 | Copy personal property total | \$28,768.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$743,768.00 |
| | | | |

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|--------------------|---------------|--------------------------------------|
| Debtor 1 | Shelly Marie Eric | kson | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT C | DF WASHINGTON | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

| 1. | Which set of exemptions are you claiming? | Check one only | , even if your | r spouse is filing with you. |
|----|---|----------------|----------------|------------------------------|
|----|---|----------------|----------------|------------------------------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|---|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 2930 NW Hill St Camas, WA 98607 Clark County | \$715,000.00 | • | \$357,676.00 | Wash. Rev. Code §§ 6.13.010, 6.13.020, 6.13.030 |
| Line from Schedule A/B: 1.1 | | | 100% of fair market value, up to any applicable statutory limit | 0.10.022, 0.10.000 |
| 2018 Honda HRV Line from Schedule A/B: 3.1 | \$17,500.00 | | \$3,250.00 | Wash. Rev. Code § 6.15.010(1)(d)(iii) |
| Ellie II olii ooliodale 172. ett | | | 100% of fair market value, up to any applicable statutory limit | 3.101010(1)(a)() |
| Household Goods and Furniture Line from Schedule A/B: 6.1 | \$5,000.00 | | \$5,000.00 | Wash. Rev. Code § 6.15.010(1)(d)(i) |
| Ente from Goriodate 702. | | | 100% of fair market value, up to any applicable statutory limit | 3.1.0.0.13(1.)(a)(i) |
| Electronics Line from Schedule A/B: 7.1 | \$400.00 | | \$400.00 | Wash. Rev. Code § 6.15.010(1)(d)(i) |
| Ente from Goriodate 702. FFI | | | 100% of fair market value, up to any applicable statutory limit | 3.10.010(1)(a)(i) |
| Hobby equipment Line from Schedule A/B: 9.1 | \$950.00 | | \$950.00 | Wash. Rev. Code § 6.15.010(1)(d)(ii) |
| Line IIoiii Schedule A/B. 3.1 | | | 100% of fair market value, up to any applicable statutory limit | 0.13.010(1)(u)(II) |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

Official Form 106C

Schedule C: The Property You Claim as Exempt

| Fill in | this informa | tion to identify you | r case: | | | |
|------------------|--|--|---|-------------------------|--|-----------------------------------|
| Debto | or 1 | Shelly Marie Eric | ckson | | | |
| | | First Name | Middle Name Last Name | | | |
| Debto (Spouse | or 2 e if, filing) | First Name | Middle Name Last Name | | | |
| | . 0, | ruptcy Court for the: | WESTERN DISTRICT OF WASHINGTON | | | |
| 0 | 2 Claro 2 a | | | | | |
| Case (if know | number _{m)} | | | | _ | if this is an led filing |
| Offic | ial Form | 106D | | | | |
| | | | Who Have Claims Secure | ed by Propert | y | 12/15 |
| s need | | | f two married people are filing together, both are out, number the entries, and attach it to this form. | | | |
| | ` , | ave claims secured by | your property? | | | |
| | No. Check th | nis box and submit th | is form to the court with your other schedules. | You have nothing else t | o report on this form. | |
| | Yes. Fill in a | Il of the information b | pelow. | · · | · | |
| Part 1 | List All S | Secured Claims | | | | |
| 2. List | all secured cla | aims. If a creditor has me than one creditor has | nore than one secured claim, list the creditor separate a particular claim, list the other creditors in Part 2. As al order according to the creditor's name. | | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| | | Credit Union | Describe the property that secures the claim: | \$9,940.00 | \$17,500.00 | \$9,940.00 |
| | Creditor's Name | | 2018 Honda HRV | | | |
| | c/o Ken Lec 1495 Wilmir Dupont, W <i>A</i> | ngton Dr Ste 1 | As of the date you file, the claim is: Check all that apply. Contingent | | | |
| ı | Number, Street, Ci | ity, State & Zip Code | Unliquidated | | | |
| Who d | owes the debt | ? Check one. | Disputed Nature of lien. Check all that apply. | | | |
| ■ Del | btor 1 only | | ☐ An agreement you made (such as mortgage or s | secured | | |
| ☐ Del | btor 2 only | | car loan) | | | |
| ☐ De | btor 1 and Debt | or 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| _ | | debtors and another | Judgment lien from a lawsuit | | | |
| _ | eck if this clair ommunity debt | | Other (including a right to offset) Vehicle L | -ien | | |
| Date d | lebt was incurr | red 2018 | Last 4 digits of account number | | | |
| | Bank of Am | erica, N.A. | Describe the property that secures the claim: | \$99,969.00 | \$715,000.00 | \$0.00 |
| | Creditor's Name | | 2930 NW Hill St., Camas WA | | | |
| | c/o Brian T. CEO | Moynihan, | | | | |
| | 100 N. Tryo | n St. | As of the date you file, the claim is: Check all that | , | | |
| | Charlotte, N | | apply. Contingent | | | |
| - | Number, Street, Ci | ity, State & Zip Code | ☐ Unliquidated | | | |
| Who d | owes the debt | ? Check one. | Disputed Nature of lien. Check all that apply. | | | |
| Del | btor 1 only | | ☐ An agreement you made (such as mortgage or s | secured | | |
| _ | btor 2 only | | car loan) | | | |
| _ | btor 1 and Debt | or 2 only | ☐ Statutory lien (such as tax lien, mechanic's lien) | | | |
| | | debtors and another | ☐ Judgment lien from a lawsuit | | | |
| | eck if this clair ommunity debt | | Other (including a right to offset) | | | |
| Date d | lebt was incurr | ed | Last 4 digits of account number | | | |

Official Form 106D Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

| Debtor 1 Shelly Marie Eric | kson | Case number (if known) | | |
|--|--|------------------------|--------------|--------|
| First Name | Middle Name Last Name | | | |
| Nationstar Mortgage, | Describe the property that secures the claim | \$260,324.00 | \$715,000.00 | \$0.00 |
| Creditor's Name dba Mr. Cooper c/o Ja Bray CE | 2930 NW Hill St Camas, WA 98607 Clark County | | | |
| 8950 Cypress Waters Blvd Coppell, TX 75019 | As of the date you file, the claim is: Check all the apply. Contingent | nat | | |
| Number, Street, City, State & Zip (Who owes the debt? Check one | ☐ Disputed | | | |
| ■ Debtor 1 only □ Debtor 2 only | . Nature of lien. Check all that apply. An agreement you made (such as mortgage car loan) | or secured | | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and a | ☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit | en) | | |
| Check if this claim relates to a community debt | | age | | |
| Date debt was incurred | Last 4 digits of account number | | | |
| | | | | |
| Add the dollar value of your ent | tries in Column A on this page. Write that number here: | \$370,233 | .00 | |
| If this is the last page of your fo Write that number here: | orm, add the dollar value totals from all pages. | \$370,233 | .00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

| Fill | in this inform | nation to identify your | case: | | | | | | | | |
|------------------------------|---|--|--|---|--|---|--|---|---|--|-------------------------|
| De | btor 1 | Shelly Marie Erick | kson | | | | | | | | |
| | | First Name | | Name | Last Name | | | | | | |
| | btor 2 buse if, filing) | First Name | Middle | Name | Last Name | | | | | | |
| Un | ited States Bar | nkruptcy Court for the: | WESTER | N DISTRICT | OF WASHINGTON | | | | | | |
| | | | | | | | | | | | |
| | se number nown) | | | | | | | | | if this is a led filing | n |
| Sc | | 106E/F /F: Creditors W diaccurate as possible. Us | | | | rt 2 for creditors | with NON | PRIORITY | claims Li | 12/1 | |
| any Scho Scho left. | executory control edule G: Execut edule D: Credito Attach the Con | racts or unexpired leases tory Contracts and Unexp ors Who Have Claims Sectinuation Page to this pag nber (if known). | that could re ired Leases (ured by Prop | esult in a clair (Official Form erty. If more | m. Also list executory cor 1106G). Do not include an space is needed, copy the | ntracts on Sched ny creditors with e Part you need, | lule A/B: F partially s fill it out, i | Property (Of secured clain number the | fficial For ims that a entries in | m 106A/B) are listed in n the boxe | and on n s on the |
| Pa | rt 1: List Al | I of Your PRIORITY Un | secured CI | aims | | | | | | | |
| 1. | Do any credito | ors have priority unsecure | d claims aga | inst you? | | | | | | | |
| | ☐ No. Go to Pa | art 2. | | | | | | | | | |
| | Yes. | | | | | | | | | | |
| 2. | identify what typ possible, list the | priority unsecured claims be of claim it is. If a claim ha e claims in alphabetical orde than one creditor holds a pa | s both priority er according to | and nonprior the creditor's | ity amounts, list that claim he name. If you have more th | nere and show bot | h priority a | ind nonprior | ity amoun | ts. As much | n as |
| | (For an explana | ation of each type of claim, s | see the instruc | ctions for this f | orm in the instruction bookle | et.) | | | | | |
| | | • | | | | Total clair | m | Priority amount | | Nonprior amount | rity |
| 2.1 | IRS | | | Last 4 digits | of account number | | \$0.00 | | \$0.00 | | \$0.00 |
| | • | editor's Name ized Insolvency Ope 7346 | r. | When was th | e debt incurred? | | | - | | | |
| | Philade | lphia, PA 19101-7346 | 6 | | | | | | | | |
| | | treet City State Zip Code | | _ | e you file, the claim is: Ch | neck all that apply | | | | | |
| | Who incurred | the debt? Check one. | | ☐ Contingen | t | | | | | | |
| | Debtor 1 o | nly | | ☐ Unliquidat | ed | | | | | | |
| | Debtor 2 o | nly | | ☐ Disputed | | | | | | | |
| | Debtor 1 a | nd Debtor 2 only | | Type of PRIC | RITY unsecured claim: | | | | | | |
| | ☐ At least on | e of the debtors and anothe | er | \square Domestic | support obligations | | | | | | |
| | ☐ Check if the | his claim is for a commur | nity debt | ■ Taxes and | I certain other debts you ow | ve the government | t | | | | |
| | | subject to offset? | • | | death or personal injury wh | • | | | | | |
| | ■ No | | | Other. Spe | ecify | | | | | | |
| | ☐ Yes | | | | Notice Only | | | | | | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 9

| | Case number (if known) | | |
|---|--|---|---------------------------|
| Washington Dept. of Rev. Priority Creditor's Name POB 47464 | Last 4 digits of account number \$0.00 When was the debt incurred? | \$0.00 | \$0.0 |
| Olympia, WA 98504 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | | |
| Who incurred the debt? Check one. | ☐ Contingent | | |
| Debtor 1 only | ☐ Unliquidated | | |
| Debtor 2 only | ☐ Disputed | | |
| Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured claim: | | |
| ☐ At least one of the debtors and another | ☐ Domestic support obligations | | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No | ■ Taxes and certain other debts you owe the government □ Claims for death or personal injury while you were intoxicated | | |
| ☐ Yes | Other. Specify Notice Only | | |
| No. You have nothing to report in this part. Submit to Yes. | | then one per- | iority. |
| Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl | this form to the court with your other schedules. e alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out | included in Par the Continuation | t 1. If more n Page of |
| ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. | e alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out | included in Par | t 1. If more n Page of |
| ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name 410 N Terry Ave. | alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already | included in Par the Continuation | t 1. If more n Page of |
| ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name | e alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out | included in Par the Continuation | t 1. If more n Page of |
| ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name 410 N Terry Ave. Seattle, WA 98109 Number Street City State Zip Code | e alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out Last 4 digits of account number When was the debt incurred? | included in Par the Continuation | t 1. If more n Page of |
| List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name 410 N Terry Ave. Seattle, WA 98109 Number Street City State Zip Code Who incurred the debt? Check one. | e alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply | included in Par the Continuation | t 1. If more n Page of |
| List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name 410 N Terry Ave. Seattle, WA 98109 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only | e alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent | included in Par the Continuation | t 1. If more n Page of |
| ■ Yes. List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name 410 N Terry Ave. Seattle, WA 98109 Number Street City State Zip Code Who incurred the debt? Check one. ■ Debtor 1 only □ Debtor 2 only | alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated | included in Par the Continuation | t 1. If more n Page of |
| List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name 410 N Terry Ave. Seattle, WA 98109 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not separation agreement or divo | rincluded in Parthe Continuation Total clair | t 1. If more n Page of |
| List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name 410 N Terry Ave. Seattle, WA 98109 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | e alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3. If you have more than three nonpriority unsecured claims fill out. Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did no report as priority claims | rincluded in Parthe Continuation Total clair | t 1. If more n Page of |
| List all of your nonpriority unsecured claims in the unsecured claim, list the creditor separately for each cl than one creditor holds a particular claim, list the other Part 2. Amazon Nonpriority Creditor's Name 410 N Terry Ave. Seattle, WA 98109 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt | alphabetical order of the creditor who holds each claim. If a creditor has more laim. For each claim listed, identify what type of claim it is. Do not list claims already creditors in Part 3.If you have more than three nonpriority unsecured claims fill out Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not separation agreement or divo | rincluded in Parthe Continuation Total clair | t 1. If more n Page of |

Schedule E/F: Creditors Who Have Unsecured Claims

| Nonpriority Creditor's Name Lockbox 6112 PO Box 7247 Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Pes When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Tontingent Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 9 only Deb |
|--|
| PO Box 981537 El Paso, TX 79998 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 2 only Debtor 1 sh claim subject to offset? Debtor 1 sh claim subject to offset? Apple Card/GS Bank USA Lockbox 6112 PO Box 7247 Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debtors and another Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 3 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Disputed |
| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Cother. Specify Credit As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Str,890 Credit Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? Student loans Contingent Unliquidated Debtor 1 only Debtor 2 only Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Contingent Conti |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 3 only □ Debtor 1 and Debtor 3 only □ Debtor 1 and Debtor 3 only □ Debtor 4 tleast one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Credit Unliquidated □ Debtor 1 only □ Debtor 1 and Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 only □ Debtor 4 only □ Debtor 5 only □ Debtor 6 only □ Debtor 8 only □ Debtor 9 only □ Debtor 9 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 only □ Debtor 1 only □ Debtor 2 only □ Debtor 1 only □ Debtor 2 only □ Debtor 2 only □ Debtor 3 only □ Debtor 4 only □ Debtor 5 only □ Debtor 5 only □ Debtor 6 NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debtor 6 NONPRIORITY unsecured claim: □ Student loans □ Debtor 6 NONPRIORITY unsecured claim: □ Student loans □ Debtor 6 NONPRIORITY unsecured claim: □ Student loans □ Debtor 7 only □ Debtor 8 only 10 |
| Debtor 1 and Debtor 2 only |
| At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising plans, and other similar debts Other. Specify Credit |
| Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Other. Specify Credit Apple Card/GS Bank USA Debts to pension or profit-sharing plans, and other similar debts |
| Clear this claim is for a community debt Sthe claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts |
| Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Credit Other. Specify Credit Last 4 digits of account number Nonpriority Creditor's Name Lockbox 6112 PO Box 7247 Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Feport as priority claims Credit Credit When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Disputed Type of NONPRIORITY unsecured claim: Credit |
| Apple Card/GS Bank USA Nonpriority Creditor's Name Lockbox 6112 PO Box 7247 Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Pres Other. Specify Credit Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit |
| Apple Card/GS Bank USA Nonpriority Creditor's Name Lockbox 6112 PO Box 7247 Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Check if this claim is for a community debt Student loans Debtor 2 only Debtor 3 only Debtor 4 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 3 only obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit |
| Nonpriority Creditor's Name Lockbox 6112 PO Box 7247 Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Pes When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Tontingent Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 9 only Deb |
| When was the debt incurred? Philadelphia, PA 19170 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debtor 1 only Check if this claim is for a community debt Student loans Debtor 1 only Check if this claim is for a community debt Student loans Debtor 2 only Check if this claim is for a community debt Student loans Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit |
| Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Check if this claim is for a community debt Sthe claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Check if this claim is for a community debt Other. Specify Credit |
| □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Other. Specify □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Credit |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Yes □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Credit |
| □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify Credit |
| Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Yes Credit |
| debt Is the claim subject to offset? No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify □ Credit |
| Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit |
| ☐ Yes ☐ Other. Specify ☐ Credit ☐ Cred |
| |
| |
| 4.4 Applied Bank. Last 4 digits of account number \$5 |
| Nonpriority Creditor's Name c/o Rocco A Abessinio, Pres/CE When was the debt incurred? |
| 2200 Concord Pike Wilmington, DE 19803 |
| Number Street City State Zip Code As of the date you file, the claim is: Check all that apply |
| Who incurred the debt? Check one. |
| ■ Debtor 1 only □ Contingent |
| ☐ Debtor 2 only ☐ Unliquidated |
| ☐ Debtor 1 and Debtor 2 only ☐ Disputed |
| ☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: |
| ☐ Check if this claim is for a community ☐ Student loans |
| debt |
| ■ No □ Debts to pension or profit-sharing plans, and other similar debts |
| ☐ Yes ☐ Other. Specify Credit |

Schedule E/F: Creditors Who Have Unsecured Claims

| Debto | Shelly Marie Erickson | Case number (if known) | |
|-------|--|---|-------------|
| 4.5 | Bank of America. | Last 4 digits of account number | \$22,617.00 |
| | Nonpriority Creditor's Name PO Box 982238 EI Paso, TX 79998 | When was the debt incurred? | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit | |
| .6 | Barclays Bank Delaware Nonpriority Creditor's Name | Last 4 digits of account number | \$4,973.00 |
| | PO Box 8803 Wilmington, DE 19899 | When was the debt incurred? | |
| | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | Other. Specify Credit | |
| 7 | Capital One | Last 4 digits of account number | \$6,607.00 |
| | Nonpriority Creditor's Name PO Box 31293 | When was the debt incurred? | |
| | Salt Lake City, UT 84131 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 9

| Shelly Marie Erickson | Case number (if known) | |
|---|---|-------------|
| Chase Bank USA, N.A. Nonpriority Creditor's Name | Last 4 digits of account number | \$5,453.00 |
| c/o CEO Jamie Dimon 201 North Walnut Street Wilmington, DE 19801 | When was the debt incurred? | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | Student loans | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit | |
| Discover Financial Services. | Last 4 digits of account number | \$6,412.00 |
| Nonpriority Creditor's Name dba Discover Card 2500 Lake Cook Road | When was the debt incurred? | |
| Riverwoods, IL 60015 | | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| □ Yes | ■ Other. Specify Credit Card | |
| ED Financial/ESA | Last 4 digits of account number | \$28,846.00 |
| Nonpriority Creditor's Name 120 N Seven Oaks Dr Knoxville, TN 37922 | When was the debt incurred? | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | . , | |
| Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ☐ Other. Specify | |

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 9

| First Premier Card | Last 4 digits of account number | \$95.00 |
|--|---|-------------|
| Nonpriority Creditor's Name 601 S Minnesota Ave Sioux Falls, SD 57104 | When was the debt incurred? | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Credit | |
| JPMCB Card | Last 4 digits of account number | \$5,407.00 |
| Nonpriority Creditor's Name PO Box 15369 Wilmington, DE 19850 | When was the debt incurred? | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | _ | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| At least one of the debtors and another | Student loans | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify Credit | |
| Paypal Credit Services | Last 4 digits of account number | \$15,338.00 |
| Nonpriority Creditor's Name PO Box 71718 | When was the debt incurred? | |
| Philadelphia, PA 19176 Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify Credit | |

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

Page 6 of 9

| Synchrony Bank / PPC | Last 4 digits of account number | \$5,600.00 |
|--|---|-------------|
| Nonpriority Creditor's Name PO Box 965005 Orlando, FL 32896 | When was the debt incurred? | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | ☐ Student loans | |
| lebt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit | |
| Synchrony Bank/ Amazon | Last 4 digits of account number | \$5,991.00 |
| Nonpriority Creditor's Name PO Box 965013 Orlando, FL 32896 | When was the debt incurred? | |
| Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| sent s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | Other. Specify Credit | |
| synchrony Bank/ PPMC Nonpriority Creditor's Name | Last 4 digits of account number | \$10,077.00 |
| PO Box 965005 | When was the debt incurred? | |
| Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| \square Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Credit | |

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

Page 7 of 9

| Debto | T 1 Shelly Marie Erickson | Case number (if known) | |
|-------|---|--|------------|
| 4.1 | | | |
| 7 | The Home Depot/CBNA | Last 4 digits of account number | \$1,220.00 |
| | Nonpriority Creditor's Name PO Box 6497 | When was the debt incurred? | |
| | Sioux Falls, SD 57117 | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Credit | |
| 4.1 | Ulta Beauty | Last 4 digits of account number | \$0.00 |
| 0 | Nonpriority Creditor's Name | | , |
| | c/o Comenity Capital Bank | When was the debt incurred? | |
| | Bankruptcy Dept PO Box 183043 | | |
| | Columbus, OH 43218-3043 | | |
| | Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No □ Yes | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Notice only | |
| | _ 1es | Other: Specify | |
| 4.1 | US Bank | | \$6,307.00 |
| 9 | Nonpriority Creditor's Name | Last 4 digits of account number | Ψ0,307.00 |
| | Bkcy Dept | When was the debt incurred? | |
| | PO Box 5229 | | |
| | Cincinnati, OH 45201 Number Street City State Zip Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | As of the date you me, the diam is. Oncok an that appry | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | □ Unliquidated | |
| | Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | lacktriangle Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify Credit | |
| | | | |

Part 3: List Others to Be Notified About a Debt That You Already Listed

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims Page 8 of 9

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you

have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|-----------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| rom Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 0.00 |
| | | | | Total Claim |
| - Total | 6f. | Student loans | 6f. | \$ 28,846.00 |
| laims | | | | |
| rom Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 141,621.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 170,467.00 |

| Fill in this inform | mation to identify your | case: | | | |
|---------------------|--------------------------|--------------------|---------------|--|---------------------|
| Debtor 1 | Shelly Marie Erick | kson | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | inkruptcy Court for the: | WESTERN DISTRICT (| OF WASHINGTON | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an |
| | | | | | amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the cor, Street, City, State and ZIP Co | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | - |
| | | | | | |
| | | | | | <u>_</u> |
| | Number | Street | | | |
| | | | | | |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | | | | | |
| | City | | State | ZIP Code | |
| 2.3 | U.I.y | | - Ciaio | 2 0000 | |
| 2.5 | | | | | _ |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | _ |
| | Number | Olleet | | | |
| | City | | State | ZIP Code | _ |
| | City | | State | ZIP Code | |
| 2.4 | | | | | _ |
| | Name | | | | |
| | | | | | |
| | - N | 0, , | | | _ |
| | Number | Street | | | |
| | - | | | | _ |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | - |
| | | | | | |
| | | | | | _ |
| | Number | Street | | | |
| | | | | | |
| | City | | State | ZIP Code | _ |
| | • | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

| | ormation to identify your | | | | |
|---------------------------------------|--|--|---|---|------------------------------------|
| Debtor 1 | Shelly Marie Eric First Name | kson Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | WESTERN DISTRICT OF | WASHINGTON | | |
| Case number | | | | | |
| (if known) | | | | | Check if this is an amended filing |
| | | | | | amended ming |
| Official F | Form 106H | | | | |
| Schedu | le H: Your Cod | ebtors | | | 12/15 |
| 1. Do you No Yes 2. Within Arizona, (| d case number (if known) I have any codebtors? (If the last 8 years, have you California, Idaho, Louisiana, I to line 3. Id your spouse, former spou | | not list either spouse erty state or territor o Rico, Texas, Wash | as a codebtor. y? (Community property st | any Additional Pages, write |
| | Yes. | | | | |
| | In which community state | e or territory did you live? | -NONE- | Fill in the name and o | current address of that person. |
| | Name of your spouse, former sp | | | | |
| in line 2 a Form 106 out Colu | again as a codebtor only in SD), Schedule E/F (Official mn 2. Summ 1: Your codebtor e, Number, Street, City, State and Zi | ors. Do not include your sp f that person is a guarantor Form 106E/F), or Schedule | or cosigner. Make | sure you have listed the o | |
| Num | nber Street | | | _ | |
| City | | State | ZIP Code | | |
| 3.2 Nam | | | | ☐ Schedule D, line☐ Schedule E/F, line☐ Schedule G, line☐ | |
| City | | State | ZIP Code | | |

Official Form 106H Schedule H: Your Codebtors Page 1 of 1

| | | | | | | | Ī | | | | |
|------------|--|---------------------------|---|---------------------------------|-----------|-----|-----------|-----------------------|-------------|-------------------------|---------|
| | in this information to the stor 1 | to identify your ca | | | | | | | | | |
| | btor 2 | Offerry Marie | LITORSOIT | | | _ | | | | | |
| | ouse, if filing) | | | | | _ | | | | | |
| Uni | ited States Bankrup | otcy Court for the | WESTERN DISTRICT | OF WASHINGTON | N | _ | | | | | |
| | se number | | | | | | | k if this is: | | | |
| (11 10 | | | | | | | | in amende Suppleme | Ū | g postpetition | chapter |
| _ | | 4001 | | | | | | | | ollowing date: | |
| | fficial Form | | | | | | Ī | /M / DD/ Y | YYY | | |
| | chedule I: | | ome sible. If two married peo | | | | | | | | 12/15 |
| atta Pa | rt 1: Describ | et to this form. (| r spouse is not filing wi On the top of any addition | | | | | | | | |
| 1. | Fill in your empl information. | loyment | | Debtor 1 | | | | Debtor 2 | or non-fi | ling spouse | |
| | If you have more than one job, attach a separate page with | | Employment status | ■ Employed | _ | | | ☐ Employed | | | |
| | information about employers. | | | ☐ Not employed | | | | ☐ Not er | mployed | | |
| | Include part-time | seasonal or | Occupation | SR. HR Busine | ess Partr | ner | | | | | |
| | self-employed wo | | Employer's name | Columbia Spo | rtswear | | | | | | |
| | Occupation may or homemaker, if | | Employer's address | 7000 N Leadbe Portland, OR 9 | | | | | | | |
| | | | How long employed the | nere? 1 year | • | | | _ | | | |
| Pai | rt 2: Give De | etails About Mon | thly Income | | | | | | | | |
| spoi | use unless you are | separated. spouse have mo | ore than one employer, cothis form. | • | · | • | oyers for | that perso | n on the li | nes below. If y | - |
| | | _ | | | | | For De | DIOF 1 | | btor 2 or ing spouse | |
| 2. | deductions). If no | ot paid monthly, o | ry, and commissions (be calculate what the month! | | 2. | \$ | 11 | ,964.00 | \$ | N/A | |
| 3. | Estimate and lis | t monthly overti | me pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | |
| 4. | Calculate gross | Income. Add lin | e 2 + line 3. | | 4. | \$ | 11,9 | 64.00 | \$ | N/A | |

Official Form 106I Schedule I: Your Income page 1

Official Form 106l Schedule I: Your Income page 2

13. Do you expect an increase or decrease within the year after you file this form?

applies

Yes. Explain:

6,682.00

Combined monthly income

12.

| Fill i | n this information to identify your case: | | | | |
|--------|--|--|------------------|---------------------|-------------------------------|
| Debt | or 1 Shelly Marie Erickson | | Chec | k if this is: | |
| | | | | An amended filing | |
| Debt | | | | | ving postpetition chapter |
| (Spo | use, if filing) | | | 13 expenses as of t | ine following date: |
| Unite | d States Bankruptcy Court for the: WESTERN DISTRICT OF WASHIN | IGTON | Ī | MM / DD / YYYY | |
| | number | | | | |
| (If kn | own) | | | | |
| Of | ficial Form 106J | | | | |
| Sc | hedule J: Your Expenses | | | | 12/15 |
| Be a | rescomplete and accurate as possible. If two married people are rmation. If more space is needed, attach another sheet to this for the complete the complete is needed, attach another sheet to this for the complete is needed. | | | | r supplying correct |
| Part | | | | | |
| 1. | Is this a joint case? | | | | |
| | ■ No. Go to line 2. | | | | |
| | ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses f | or Separate House | hold of Debt | or 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| ۷. | | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No □ Yes |
| 3. | Do your expenses include | | | | ⊔ Yes |
| 0. | expenses of people other than yourself and your dependents? | | | | |
| | 2: Estimate Your Ongoing Monthly Expenses | | | | |
| exp | mate your expenses as of your bankruptcy filing date unless yo enses as of a date after the bankruptcy is filed. If this is a supple licable date. | | | | |
| Incl | ude expenses paid for with non-cash government assistance if | vou know | | | |
| the | value of such assistance and have included it on Schedule I: Yo | | | v | |
| (Off | cial Form 106l.) | | | Your expe | enses |
| 4. | The rental or home ownership expenses for your residence. Incorpayments and any rent for the ground or lot. | clude first mortgage | 4. \$ | | 1,949.00 |
| | If not included in line 4: | | • | | · |
| | | | | | _ |
| | 4a. Real estate taxes | | 4a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance4c. Home maintenance, repair, and upkeep expenses | | 4b. \$ 4c. \$ | | 0.00 |
| | 4d. Homeowner's association or condominium dues | | 4d. \$ | | 100.00 0.00 |
| 5. | Additional mortgage payments for your residence, such as hom | e equity loans | 5. \$ | | 800.00 |

Official Form 106J Schedule J: Your Expenses page 1

| ebtor 1 | Shelly M | larie Erickson | Case num | ber (if known) | |
|---------|-----------------------|--|--------------|----------------|--------------------------|
| Util | lities: | | | | |
| 6a. | Electricity | , heat, natural gas | 6a. | \$ | 220.00 |
| 6b. | Water, se | wer, garbage collection | 6b. | \$ | 275.00 |
| 6c. | Telephon | e, cell phone, Internet, satellite, and cable services | 6c. | \$ | 280.00 |
| 6d. | Other. Sp | ecify: | 6d. | \$ | 0.00 |
| Foo | | ekeeping supplies | | \$ | 541.00 |
| Chi | ildcare and | children's education costs | 8. | \$ | 0.00 |
| | | Iry, and dry cleaning | 9. | \$ | 96.00 |
| | • | products and services | 10. | \$ | 43.00 |
| | | ental expenses | 11. | | 79.00 |
| | | Include gas, maintenance, bus or train fare. | | <u> </u> | |
| | | ear payments. | 12. | \$ | 400.00 |
| | | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 100.00 |
| Cha | aritable con | tributions and religious donations | 14. | \$ | 20.00 |
| Ins | urance. | • | | · - | |
| | | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a | a. Life insura | ance | 15a. | \$ | 0.00 |
| 15b | o. Health ins | surance | 15b. | \$ | 0.00 |
| 150 | . Vehicle in | surance | 15c. | \$ | 71.00 |
| 15c | d. Other insu | urance. Specify: | 15d. | \$ | 0.00 |
| | | nclude taxes deducted from your pay or included in lines 4 or 20. | | | |
| | ecify: | , , , | 16. | \$ | 0.00 |
| Ins | tallment or I | ease payments: | | | |
| 17a | a. Car paym | ents for Vehicle 1 | 17a. | \$ | 0.00 |
| 17b | o. Car paym | ents for Vehicle 2 | 17b. | \$ | 0.00 |
| 17c | . Other. Sp | ecify: | 17c. | \$ | 0.00 |
| 17c | d. Other. Sp | ecify: | 17d. | \$ | 0.00 |
| | | of alimony, maintenance, and support that you did not report a | | \$ | 0.00 |
| | | your pay on line 5, Schedule I, Your Income (Official Form 106I) | . 10. | \$ | |
| | ner payment ecify: | s you make to support others who do not live with you. | 19. | > | 0.00 |
| | , | erty expenses not included in lines 4 or 5 of this form or on Sch | | our Incomo | |
| | | s on other property | 20a. | | 0.00 |
| | . Real esta | | 20a. 20b. | · · | |
| | | | | · | 0.00 |
| | | homeowner's, or renter's insurance | 20c. | · · | 0.00 |
| | | nce, repair, and upkeep expenses | 20d. | · | 0.00 |
| | | ner's association or condominium dues | 20e. | · | 270.00 |
| Oth | ner: Specify: | Misc (gifts, unexpected expenses, etc) | 21. | +\$ | 189.00 |
| . Cal | culate your | monthly expenses | | | |
| | a. Add lines 4 | | | \$ | 5,433.00 |
| 22b | o. Copy line 2 | 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | , |
| | | a and 22b. The result is your monthly expenses. | | \$ | 5,433.00 |
| Cal | lculate vour | monthly net income. | | | <u> </u> |
| | | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 6,682.00 |
| | | r monthly expenses from line 22c above. | 23a. 23b. | · | |
| 230 | . Сору уоц | i monuny expenses nomine 220 dbuve. | ۷۵۵. | -ψ | 5,433.00 |
| 230 | | our monthly expenses from your monthly income. | 20 | ¢. | 1,249.00 |
| | The resul | t is your monthly net income. | 23c. | \$ | 1,249.00 |
| For | example, do y | an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect yo terms of your mortgage? | | | or decrease because of a |
| | No. | | | | |
| | Yes. | Explain here: | | | |

| Fill in this informa | ation to identify your | ase: | | | | |
|---------------------------------|--|---|---------------|-----------------------------|--|------|
| Debtor 1 | Shelly Marie Erick | | | | | |
| | First Name | Middle Name | Last | t Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last | t Name | | |
| United States Bank | cruptcy Court for the: | WESTERN DISTRICT | OF WASHIN | GTON | | |
| Case number | | | | | ☐ Check if this is an amended filing | |
| Official Form | | n Individual | l Debte | or's Schedule | 26 | 2/15 |
| <u> Declarati</u> | on About a | II III aiviaaa | Desit | or 3 Correction | 12 | 2/13 |
| If two married peop | ple are filing together | , both are equally respo | onsible for s | upplying correct informat | ion. | |
| obtaining money o | r property by fraud ir U.S.C. §§ 152, 1341, 1 | connection with a ban | | | Ise statement, concealing property, o \$250,000, or imprisonment for up to 2 | |
| Did you pay o | or agree to pay some | one who is NOT an atto | rney to help | you fill out bankruptcy fo | orms? | |
| ■ No | | | | | | |
| ☐ Yes. Nar | me of person | ach Bankruptcy Petition Preparer's Notic claration, and Signature (Official Form 1 | | | | |
| | of perjury, I declare rue and correct. | hat I have read the sun | nmary and se | chedules filed with this de | eclaration and | |
| X /s/ Shelly | / Marie Erickson | | Х | | | |
| Shelly M | arie Erickson of Debtor 1 | | | Signature of Debtor 2 | | |
| Date Au | igust 18, 2023 | | | Date | | |

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

| Fill ir | n this inforn | nation to identify you | r case: | | | | |
|---|-----------------------|----------------------------------|--|---|--|---|--|
| Debte | | Shelly Marie Eric | | | | | |
| Dobit | JI 1 | First Name | Middle Name | Last Name | | | |
| Debto | or 2 e if, filing) | First Name | Middle Name | Last Name | | | |
| | | | WESTERN DISTRICT OF | | | | |
| Office | u Siales Da | nkruptcy Court for the: | WESTERN DISTRICT OF | WASHINGTON | | | |
| Case number (if known) | | | | | | ☐ Check if this is an amended filing | |
| Sta | complete a | and accurate as possi | attach a separate sheet to | re filing together, both are | ankruptcy equally responsible for sup vadditional pages, write you | | |
| Part ' | Give D | Details About Your Ma | rital Status and Where You | Lived Before | | | |
| 1. V | Vhat is you | r current marital statu | s? | | | | |
| [| ☐ Married ■ Not mar | ried | | | | | |
| 2. C | Ouring the la | ast 3 years, have you | lived anywhere other than | where you live now? | | | |
| • | ■ No □ Yes. Lis | it all of the places you l | ived in the last 3 years. Do no | ot include where you live now | : | | |
| | Debtor 1: | | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | |
| | | | | | ity property state or territory co, Texas, Washington and W | | |
| [| ☐ No ■ Yes. Ma | ake sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | ificial Form 106H). | | | |
| Part : | 2 Explai | n the Sources of You | r Income | | | | |
| F | ill in the tota | al amount of income yo | nployment or from operatin u received from all jobs and a have income that you receive | all businesses, including part- | | ndar years? | |
| | ☐ No ■ Yes. Fill | I in the details. | | | | | |
| | | | Debtor 1 | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | |
| From January 1 of current year until the date you filed for bankruptcy: | | | ■ Wages, commissions, bonuses, tips | \$87,380.00 | ☐ Wages, commissions, bonuses, tips | | |
| | | | ☐ Operating a business | | ☐ Operating a business | | |

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Creditor's Name and Address

Dates of payment

Total amount Amount you still owe

Was this payment for ...

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

□ No.

Yes

Go to line 7.

attorney for this bankruptcy case.

Official Form 107

Case title

Case number

Yes. Fill in the details.

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Court or agency

Nature of the case

page 3

Status of the case

| DCI | Silelly Walle Elickson | Case number | (II KIIOWII) | | | |
|-------|---|--|--------------------------|--------------------------|--|--|
| | | | | | | |
| 10. | Within 1 year before you filed for bankrup Check all that apply and fill in the details belo | ccy, was any of your property repossessed, foreclosed w. | l, garnished, attache | d, seized, or levied? | | |
| | No. Go to line 11. | | | | | |
| | Yes. Fill in the information below. | Describe the Property | Data | Value of the | | |
| | Creditor Name and Address | Describe the Property | Date | property | | |
| | | Explain what happened | | | | |
| 11. | Within 90 days before you filed for bankru accounts or refuse to make a payment be No | ptcy, did any creditor, including a bank or financial inscause you owed a debt? | stitution, set off any a | amounts from your | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Creditor Name and Address | Describe the action the creditor took | Date action was taken | Amount | | |
| 12. | Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or | ccy, was any of your property in the possession of an a | assignee for the bend | efit of creditors, a | | |
| | ■ No □ Yes | | | | | |
| Pai | t 5: List Certain Gifts and Contributions | | | | | |
| 13. | Within 2 years before you filed for bankru | otcy, did you give any gifts with a total value of more t | han \$600 per person | ? | | |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details for each gift. | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value | | |
| | Person to Whom You Gave the Gift and Address: | | | | | |
| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? | | | | | |
| | No☐ Yes. Fill in the details for each gift or co | atribution | | | | |
| | Gifts or contributions to charities that to | | Dates you | Value | | |
| | more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | contributed | | | |
| Pai | t 6: List Certain Losses | | | | | |
| 45 | | and a single control of the single control o | | t fine other diseases | | |
| 15. | or gambling? | cy or since you filed for bankruptcy, did you lose any | ining because of the | t, fire, other disaster, | | |
| | _ | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | | Describe any incurrence accurage for the lead | Data of your | Value of managery | | |
| | how the loss occurred | Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | |
| Pai | t7: List Certain Payments or Transfers | | | | | |
| | | | | | | |
| 16. | consulted about seeking bankruptcy or p | tcy, did you or anyone else acting on your behalf pay of eparing a bankruptcy petition? eparers, or credit counseling agencies for services required | | rty to anyone you | | |
| | □ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Person Who Was Paid | Description and value of any property | Date payment | Amount of | | |
| | Address Email or website address Person Who Made the Payment, if Not Yo | transferred u | or transfer was made | payment | | |
| Offic | • | ment of Financial Affairs for Individuals Filing for Bankruptcy | | page 4 | | |

| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and v transferred | alue of any prop | erty | Date payment or transfer was made | Amount of payment | |
|-----|---|---|---------------------------|------------------|---|---|--|
| | Evergreen Financial Counseling POB 1562 Portland, OR 97062-9997 | Certificate of Cr | redit Counselin | ng | 7/10/23 | \$19.99 | |
| | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Person Who Was Paid | Description and v | value of any prop | ortv | Date payment | Amount of | |
| | Address | transferred | raide of any prop | erty | or transfer was made | payment | |
| 18. | Within 2 years before you filed for bankruptcy, | , did you sell, trade, o | or otherwise tran | sfer any prop | perty to anyone, othe | r than property | |
| | transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | |
| | Person Who Received Transfer Address | Description and v property transfer | | | any property or received or debts change | Date transfer was made | |
| | Person's relationship to you | | | | _ | | |
| 19. | Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protection No. | | y property to a s | self-settled tru | ust or similar device | of which you are a | |
| | Yes. Fill in the details. | | | | | | |
| | Name of trust | me of trust Description and value of the property transferred | | | | | |
| Par | List of Certain Financial Accounts, Instru | uments, Safe Deposit | t Boxes, and Sto | rage Units | | | |
| | Within 1 year before you filed for bankruptcy, sold, moved, or transferred? | | | | | | |
| | Include checking, savings, money market, or chouses, pension funds, cooperatives, associa No | | | | iares in banks, credi | umons, brokerage | |
| | Yes. Fill in the details. | | | | | | |
| | | ast 4 digits of ccount number | Type of accour instrument | clc mc | ite account was osed, sold, oved, or insferred | Last balance before closing or transfer | |
| 21. | Do you now have, or did you have within 1 year cash, or other valuables? | ar before you filed for | bankruptcy, any | y safe deposi | t box or other depos | itory for securities, | |
| | ■ No □ Yes. Fill in the details. | | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe the | contents | Do you still have it? | |
| | | | | | | | |

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

| 00 | Have the standard manager to a standard to | daaa akkan khan wasan basan sa 1911 - | Lucan hafana wan filed for borden () | | | |
|--------|---|---|---|-----------------------|--|--|
| 22. | Have you stored property in a storage unit or p | lace other than your nome within 1 | year before you filed for bankruptcy? | • | | |
| | ■ No | | | | | |
| | Yes. Fill in the details. | | | | | |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or had access to it? Address (Number, Street, City, State and ZIP Code) | Describe the contents | Do you still have it? | | |
| Par | t 9: Identify Property You Hold or Control for | • | | | | |
| 23. | rty you borrowed from, are storing for, | or hold in trust | | | | |
| | for someone. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | |
| Par | t 10: Give Details About Environmental Inform | ation | | | | |
| For | the purpose of Part 10, the following definitions | apply: | | | | |
| | Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su | air, land, soil, surface water, groun | • | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposa | - | law, whether you now own, operate, o | r utilize it or used | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | | s waste, hazardous substance, toxic s | ubstance, | | |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of whe | n they occurred. | | | |
| 24. | Has any governmental unit notified you that yo | u may be liable or potentially liable | e under or in violation of an environme | ntal law? | | |
| | ■ No | | | | | |
| | ☐ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | |
| 26. | Have you been a party in any judicial or admini | | ironmental law? Include settlements a | nd orders. | | |
| | ■ No □ Yes. Fill in the details. | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | |
| Par | t 11: Give Details About Your Business or Con | nnections to Any Business | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have a | ny of the following connections to any | business? | | |
| | ☐ A sole proprietor or self-employed in a | trade, profession, or other activity | , either full-time or part-time | | | |
| | ☐ A member of a limited liability company | y (LLC) or limited liability partnersh | nip (LLP) | | | |
| Offici | | of Financial Affairs for Individuals Filin | | page 6 | | |

| Debtor 1 | | Shelly Marie Erickson | | Case number (if known) | | | |
|-------------------|----------------------------------|---|---|---|-------------|--|--|
| | | | | | | | |
| | | ☐ A partner in a partnership | | | | | |
| | | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | |
| | | ☐ An owner of at least 5% of the votin | g or equity securities of a corporation | | | | |
| | | No. None of the above applies. Go to I | Part 12. | | | | |
| | | Yes. Check all that apply above and fill | all that apply above and fill in the details below for each business. | | | | |
| | | siness Name dress | Describe the nature of the business | Employer Identification number Do not include Social Security numb | or or ITIN | | |
| | | nber, Street, City, State and ZIP Code) | Name of accountant or bookkeeper | • | er or irin. | | |
| | | | | Dates business existed | | | |
| 28. | | nin 2 years before you filed for bankrupt itutions, creditors, or other parties. | tcy, did you give a financial statement to | anyone about your business? Include al | financial | | |
| | | No | | | | | |
| | | Yes. Fill in the details below. | | | | | |
| | | me dress nber, Street, City, State and ZIP Code) | Date Issued | | | | |
| Par | t 12: | Sign Below | | | | | |
| are to with 18 U | true a a ba J.S.C. Shel | and correct. I understand that making a | | I declare under penalty of perjury that th obtaining money or property by fraud in ears, or both. | | | |
| | | re of Debtor 1 | | | | | |
| Dat | e A | August 18, 2023 | Date | | | | |
| Did ■ N □ Y | lo | attach additional pages to Your Stateme | ent of Financial Affairs for Individuals Fi | ng for Bankruptcy (Official Form 107)? | | | |
| ■ N | lo | | t an attorney to help you fill out bankrup | | | | |
| | | | | | | | |

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 7

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$78 | administrative fee |
| + \$15 | trustee surcharge |
| \$338 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$278 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$78 | administrative fee |
| | \$313 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Western District of Washington

| In r | | in District of Washingt | Case No | | |
|------|---|---|---|-------------------------|---------------------|
| | | Debtor(s) | Chapter | 13 | |
| | DISCLOSURE OF COMPEN | SATION OF ATTO | RNEY FOR D | EBTOR(S) | |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of | of the petition in bankruptcy | , or agreed to be pai | d to me, for services r | at endered or to |
| | For legal services, I have agreed to accept | | \$ | 5,000.00 | |
| | Prior to the filing of this statement I have received | | \$ | 500.00 | |
| | Balance Due | | \$ | 4,500.00 | |
| 2. | \$313.00 of the filing fee has been paid. | | | | |
| 3. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 5. | ■ I have not agreed to share the above-disclosed compe | nsation with any other person | unless they are men | mbers and associates of | of my law firm. |
| | ☐ I have agreed to share the above-disclosed compensate copy of the agreement, together with a list of the name | | | | law firm. A |
| 5. | In return for the above-disclosed fee, I have agreed to ren | der legal service for all aspec | ts of the bankruptcy | case, including: | |
| | a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, states c. Representation of the debtor at the meeting of creditor d. [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hour | ment of affairs and plan which is and confirmation hearing, a duce to market value; ex is as needed; preparation | n may be required; nd any adjourned he emption planning | earings thereof; | filing of |
| 7. | By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc garnished pre-petition, relief from stay ac | chargeability actions, jud | icial lien avoidan | | |
| | | CERTIFICATION | | | |
| this | I certify that the foregoing is a complete statement of any bankruptcy proceeding. | agreement or arrangement for | r payment to me for | representation of the | debtor(s) in |
| | August 18, 2023 | /s/ Timothy M. Co | | | |
| 1 | Date | Timothy M. Cole Signature of Attorna | | | |
| | | OlsenDaines | - | | |
| | | PO Box 12829 Salem, OR 97309 |) | | |
| | | (503) 362-9393 | | | |
| | | Name of law firm | | | |
| | | | | | |

United States Bankruptcy Court Western District of Washington

| In re Shelly Marie | Erickson | | Case No. | |
|---------------------|-------------------------------|--|-----------------------|-----------------------|
| | | Debtor(s) | Chapter | 13 |
| | VERIFICA | ATION OF CREDITO | R MATRIX | |
| The above-named Deb | otor hereby verifies that the | attached list of creditors is true and | d correct to the best | of his/her knowledge. |
| Date: August 18, 20 | 023 | /s/ Shelly Marie Erickson | | |

Signature of Debtor

IRS CHASE BANK USA, N.A. THE HOME DEPOT/CBNA
CENTRALIZED INSOLVENCY OPER. C/O CEO JAMIE DIMON PO BOX 6497
PO BOX 7346 201 NORTH WALNUT STREET SIOUX FALLS, SD 57117 PHILADELPHIA, PA 19101-7346 WILMINGTON, DE 19801

AMAZON
410 N TERRY AVE.
SEATTLE, WA 98109
DISCOVER FINANCIAL SERVICES. ULTA BEAUTY
C/O COMENITY CAPITAL BANK
BANKRUPTCY DEPT
RIVERWOODS, IL 60015
PO BOX 183043
COLUMBUS, OH 43218-3043

AMERICA'S CREDIT UNION ED FINANCIAL/ESA US BANK
C/O KEN LEONARD, CEO 120 N SEVEN OAKS DR
BKCY DEPT
1495 WILMINGTON DR STE 1 KNOXVILLE, TN 37922 PO BOX 5229
CINCINNATI, OH 45201

AMERICAN EXPRESS FIRST PREMIER CARD WASHINGTON DEPT. OF REV. PO BOX 981537 601 S MINNESOTA AVE POB 47464 EL PASO, TX 79998 SIOUX FALLS, SD 57104 OLYMPIA, WA 98504

APPLE CARD/GS BANK USA
LOCKBOX 6112 PO BOX 7247
PHILADELPHIA, PA 19170

JPMCB CARD
PO BOX 15369
WILMINGTON, DE 19850

APPLIED BANK.

C/O ROCCO A ABESSINIO, PRES/CEDBA MR. COOPER C/O JAY BRAY CE
2200 CONCORD PIKE

WILMINGTON, DE 19803

NATIONSTAR MORTGAGE, LLC.
8950 CYPRES WATERS BLVD
COPPELL, TX 75019

BANK OF AMERICA, N.A.

C/O BRIAN T. MOYNIHAN, CEO
PO BOX 71718
PHILADELPHIA, PA 19176
PHILADELPHIA, PA 19176 CHARLOTTE, NC 28255

BANK OF AMERICA. SYNCHRONY BANK / PPC PO BOX 982238 PO BOX 965005 EL PASO, TX 79998 ORLANDO, FL 32896

BARCLAYS BANK DELAWARE SYNCHRONY BANK/ AMAZON PO BOX 8803 PO BOX 965013 ORLANDO, FL 32896

CAPITAL ONE SYNCHRONY BANK/ PPMC PO BOX 31293 PO BOX 965005 SALT LAKE CITY, UT 84131